

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

10700315

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT										
	DND	DEP	DND	DEP	DND	DEP		DND	DEP	DND	DEP	DND	DEP	DND	DEP
1							51								
2							52								
3							53								
4							54								
5							55								
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43							93								
44							94								
45							95								
46							96								
47							97								
48							98								
49							99								
50							100								
TOTAL IND.	4						TOTAL IND.								
TOTAL DEP.	49						TOTAL DEP.								
TOTAL CLAIMS	51						TOTAL CLAIMS								